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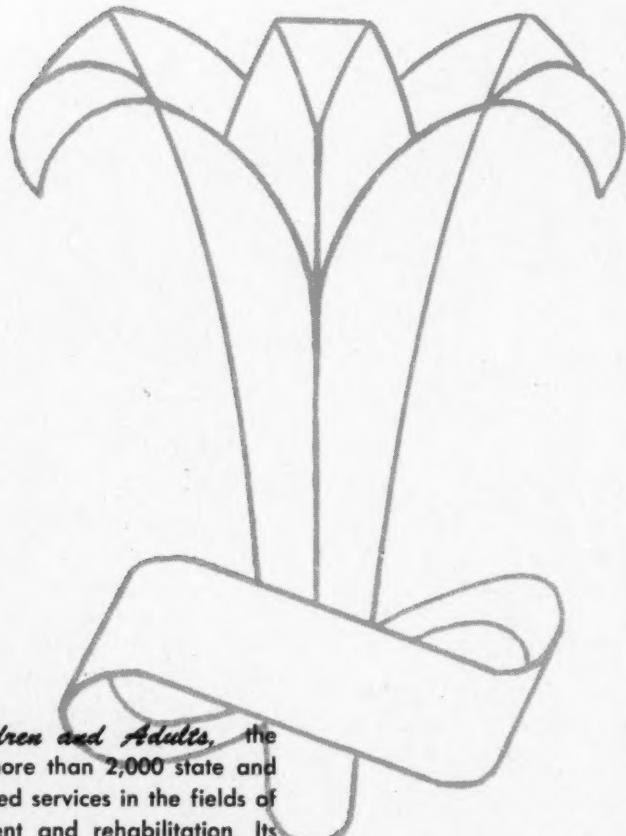
The monthly bibliography for
workers with the handicapped

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THE NATIONAL SOCIETY
for
CRIPPLED CHILDREN and Adults, Inc.
11 SO. LA SALLE ST., CHICAGO 3, ILL

THE EASTER SEAL AGENCY

HELP CRIPPLED CHILDREN



The National Society for Crippled Children and Adults, the Easter Seal society, a nationwide federation of more than 2,000 state and local member societies, provides a variety of needed services in the fields of health, welfare, education, recreation, employment and rehabilitation. Its three-point program is:

Education of the public, professional workers and parents.

Research to provide increased knowledge of the causes and prevention of handicapping conditions, and in methods of improved care, education and treatment of the handicapped.

Direct Services to the handicapped, including case finding, diagnostic clinics, medical care, physical, occupational, and speech and hearing therapy, treatment and training centers and clinics, special schools and classes, teaching of the home-bound, psychological services, vocational training, curative and sheltered workshops, employment service, camps, recreational services, and provision of braces, appliances and equipment.



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AMERICAN INSTRUCTORS OF THE DEAF--PROCEEDINGS

178. American Instructors of the Deaf

Report of the proceedings of the thirty-fifth meeting of the convention of the ..., June 17 to 22, 1951, Missouri School for the Deaf, Fulton, Missouri. Washington, D. C., Govt. Print. Off., 1952. 365 p. (Senate document no. 99, 82nd Congress, 2d session)

Papers from the proceedings cover all aspects of education for the deaf and elements of the curriculum, with emphasis on speech and speech methods, health and physical education, audio-visual education, vocational training and guidance, mental hygiene, and nursery school education for the deaf child.

AMPUTATION--EQUIPMENT

179. The juvenile amputee: a symposium. Orthopedic and Prosthetic Appliance

J. Dec., 1952. 6:4:13-31.

Contents: Prosthetic problems in the juvenile amputee, Charles H. Frantz. -Training the juvenile amputee, John Steensma. -Children's prostheses, John J. Dubinshak.

Mary Free Bed Convalescent Home and Orthopedic Center, Grand Rapids, serves as the Center for the Michigan Crippled Children Commission's Juvenile Amputee Training Program which is described in this symposium.

AMPUTATION--EQUIPMENT--RESEARCH

180. New York University. College of Engineering. Research Division

Field test of the Navy above-the-knee prosthesis, prepared by Staff, Prosthetic Devices Study. New York, The University, 1953. various paging. (Research Div., Project no. 115, report no. 115.16) Mimeo.

A report of a nation-wide field test, using fifty amputees, to test the acceptability of the Navy Leg as a functional and cosmetic device, and to determine the maintenance requirements of the Leg over an extended period of normal use. Results of the test are given as are numerous clinical forms used to record data. Statistical tables are included to analyze data.

AMPUTATION--MENTAL HYGIENE

181. Yost, Orin Ross

Personality changes in armless veterans. Southern Med. and Surgery.

June, 1952. 114:6:151.

A brief article on the psychological effects of the loss of the arm, brought to light by studies of World War II veterans suffering such loss. Despondency, depression, resentment, hopelessness, and a feeling of unworthiness are most often noted. Loss of one or both arms is felt more keenly than a leg amputation since the veteran feels it terminates many forms of social intercourse for him.

AMPUTATION--PHYSICAL THERAPY

182. Painter, Cecil W.

Prosthetic training of a hemipelvectomy patient, by Cecil W. Painter and Odon F. von Werssowetz. Phys. Therapy Rev. Jan., 1953. 33:1:10-16.

"A report of the program followed in the physical rehabilitation of a single case of a hemipelvectomy amputee has been given. An attempt has been made to clearly present the problems encountered, the means taken, and the methods used in resolving these problems. The rehabilitation objectives for the patient were stated. The degrees of success with which he achieved those objectives is indicative of what might be accomplished by people with hind-quarter amputations "--Conclusion.

AMPUTATION--PSYCHOLOGICAL TESTS

183. Manson, Morse P.

Some psychological findings in the rehabilitation of amputees, by Morse P. Manson and George V. Devins. J. Clinical Psych. Jan., 1953. 9:1:65-66. Reprint.

In an attempt to determine the predictability of outcome in rehabilitation of amputees, a group of thirty male amputees at Veterans Administration Hospital, Long Beach, California, were studied by corrective therapists and their adjustment evaluated. Differences noted in rehabilitation activities were judged to be the products of personality structure and dynamics; the best criterion of the amputee's ability to adjust to rehabilitation is his total life picture. The mature, well-adjusted individual is, naturally, a better rehabilitation risk. Comparisons of individuals assigned to the poor group and the good group (judged by adjustment) are made.

ART

184. Heyman, Carolyn M.

Painting for the crippled child, by Carolyn M. Heyman and Anna A. Martorana. Crippled Child. February, 1953. 30:5:16-18.

Painting has many characteristics making it especially suitable in an art program for handicapped children. It can be the creative expression for the child of his needs, aggressions and hostilities, fears and hopes. The therapeutic value of the medium, its flexibility, and its use with minimum supervision recommend it as highly desirable. The teacher may develop an understanding of the mental, social, and emotional make-up of the child through continual study of a child's paintings.

BLIND--SOCIAL SERVICE

185. Barnett, M. Robert

The home teacher; a specialist in people. New Outlook for the Blind. Dec., 1952. 46:10:277-282.

The keynote address given by Mr. Barnett at the 1952 convention of the Eastern Conference of Home Teachers. In it he emphasizes one phase of the home teacher's work--his contribution to the adjustment of the blind to their handicap. Although he advocates both group training and home teaching, it is the home teacher, as a "specialist" in people, who takes up where group training leaves off, supplying concrete and intangible aids for adjustment.

BLIND--SPECIAL EDUCATION

See 209.

BLIND--SPECIAL EDUCATION--OREGON

186. Jones, John W.

Developments in Oregon's program for educating blind children.
Exceptional Children. Jan., 1953. 19:4:131-134, 142.

The Oregon Plan of education for blind children calls for the return of all ninth grade residential school graduates of the Oregon School for the Blind to the public schools when they seem capable and adequately prepared for participation in the public school program. This article presents some of the newer developments which have come to light through experience with blind children in public school classrooms.

BRAIN INJURIES--DIAGNOSIS

187. Doll, Edgar A.

Mental deficiency vs. neurophrenia. Am. J. Mental Deficiency.
Jan., 1953. 57:3:477-480.

The writer points out differences between mental deficiency and neurophrenia, the prognosis for the latter being typically favorable even though it may not be possible to specify the ultimate degree of attainment. With mental deficiency the prospect of ultimately favorable attainment is pessimistic. The concept of neurophrenia is still at the level of exploratory clinical investigation, hypothesis and inference. Social management, educational therapy, medical and psychiatric treatment are likewise at the speculative, experimental stage.

BURNS--MEDICAL TREATMENT

188. Rhoads, Jonathan E.

The management of burns, with special reference to rehabilitation.
Phys. Therapy Rev. Jan., 1953. 33:1:5-9.

With the possibilities of atomic warfare, increased interest in the treatment and management of burns has been shown. The writer reviews the essentials of treatment for burn shock, surgical grafting and its value in the healing process, and the contribution made by physical therapy in rehabilitating the patient with severe burns. The psychological advantages of a physical therapy program, with its activities by which he can measure his progress, are a necessary and useful part of treatment.

CAMPING

189. Foster, Walter N.

What kind of a camp for a crippled child? Crippled Child. Feb., 1953.
30:5:24-27.

In this excerpt from his doctoral dissertation, Dr. Foster explains the various types of camping services available for the handicapped child and points out the advantages and disadvantages of each. Whichever type is chosen--and the choice should be made on an individual basis considering many factors--it is agreed that physically handicapped children need camping experiences for the same reason as any child. This article should be helpful to parents and to administrators alike in choosing the right sort of camping experience for the individual child.

CAMPING--PENNSYLVANIA

190. Pennsylvania. Pennsylvania Society for Crippled Children and Adults
Camps for the physically handicapped, 1952; twelfth annual report.
Harrisburg, Pa., The Society, 1952. 57 p. illus. Mimeo.

Presented in this report is a brief summary of five camping programs operated by the Pennsylvania Society during the 1952 season. Details of administration, necessary facilities, typical daily programs, menus, operating costs, and equipment will be of help to those planning similar programs of camping for handicapped children.

Available from the Pennsylvania Society for Crippled Children and Adults, 1107 N. Front St., Harrisburg, Penn., at \$1.00 a copy.

CEREBRAL PALSY

See 201; 207; 226.

CEREBRAL PALSY--DIAGNOSIS

191. Asher, Patria

A study of 63 cases of athetosis with special reference to hearing defects. Arch. Disease in Childhood. Oct., 1952. 27:135:475-477.
Reprint.

A report of a study of the incidence of hearing defects in athetosis is given here; subjects were patients attending the Spastic Clinic at the Birmingham (England) Children's Hospital. Results, together with a study of neonatal history, throw light on the etiology of the disease. Diagnosis of deafness in some cases has led to a revision of previous estimates of intelligence in these children. In 34 of the 63 cases there was history of neonatal jaundice; in 22 of the 34 cases, Rh iso-immunization was also present. In most of the 29 non-jaundiced cases, the history suggested birth injury. Evidence suggests that athetosis following neonatal jaundice has a similar pathological basis whether or not iso-immunization is present. All but two of the 24 jaundiced cases tested had hearing defects as compared to four of the 18 non-jaundiced. Deafness often leads to a mistaken diagnosis of mental deficiency.

CEREBRAL PALSY--INSTITUTIONS--CALIFORNIA

192. Norris, Martha J.

Cerebral palsy mobile unit. Phys. Therapy Rev. Jan., 1953.
33:1:16-20.

A description of the mobile unit established by the California Elks Association and in operation since August, 1951. Included is a list of equipment carried in the unit, how the program operates, and a discussion of the work done by parents' groups in conjunction with therapists employed for the unit. Advantages and disadvantages of the plan are explained. The ultimate objective of the program is to assist in the establishment of permanent community facilities for the care of cerebral palsied children in an area.

CEREBRAL PALSY--MEDICAL TREATMENT

193. Obholzer, A.

Cerebral palsy; some cases from the schools for the physically handicapped, Kimberley. So. African Med. J. Oct. 25, 1952. 26:43:853-855.
Reprint.

CEREBRAL PALSY--MEDICAL TREATMENT (continued)

The writer presents some cases illustrating the spastic, flaccid, rigid, and athetoid types of cerebral palsy, observed in children served by the schools for the physically handicapped in Kimberley, South Africa. He discusses briefly the etiology, characteristics, and treatment of each type, and in conclusion, sums up the aims of the schools.

CEREBRAL PALSY--PROGRAMS

194. 34 steps; an introduction to Freddie Wilson, 1953's Easter Seal boy.
Crippled Child. Feb., 1953. 30:5:12-14.

Freddie Wilson, of Reno, Nevada, chosen to be the National Society for Crippled Children and Adults' Easter Seal boy of 1953, is typical of the many handicapped children who have been helped, through the services of Easter Seal societies and the contributions of their families, to a well-adjusted, independent life. Learning to walk was a major triumph for the boy who achieved 34 steps at the age of nine. Unable to use his hands, at the age of five, for any purposeful activity, Freddie has made great strides and now has many interesting hobbies in handcraft. Such help for all handicapped children is possible through Easter Seal services.

CEREBRAL PALSY--SPECIAL EDUCATION

195. Fouracre, Maurice H.

Education of children with mental retardation accompanying cerebral palsy, by Maurice H. Fouracre and Ellen A. Thiel. Am. J. Mental Deficiency. Jan., 1953. 57:3:401-414.

A re-evaluation of school placement, promotional policies, schedule planning, and the curriculum provided the cerebral palsied child is necessary, due to physical and mental limitations of this group of children. A flexible, functional curriculum, adjustable to develop each child's potential performance to its maximum, benefits the community as well as the child. Discussed are the incidence of mental disability, educational objectives, disadvantages of segregation of the handicapped, and teaching procedures.

Parts of this paper were presented at the Institute on Cerebral Palsy, conducted by Coordinating Council for Cerebral Palsy of New York City, January, 1952.

CEREBRAL PALSY--SPEECH CORRECTION

See 258.

CHILD BEHAVIOR--INSTITUTIONS

See 259.

CHILD WELFARE

See 256.

CHILDREN'S LITERATURE--CATALOGS

196. National Council of Teachers of English

Learning to live in 1953; basic relationships of life; a booklist for children and young people, selected, classified, graded, annotated. Chicago, The Council, 1952. 59 p.

CHILDREN'S LITERATURE--CATALOGS (continued)

Combined book exhibit, 42nd annual meeting of the . . . , Boston.

The classification scheme selected for the Combined Book Exhibit, planned for the 42nd annual meeting of the National Council of Teachers of English, was based on the ways in which children approach life and its demands. The conventional categories are not used; books are grouped under such headings as: learning to live with yourself, understanding the world around you, understanding the universe, expressing the meanings of life, learning to live with others. A short list of books to help adults understand ways in which children use books in the home and at school is included. Complete information is given on all books, including annotations and grades for which material is indicated. A directory of publishers participating in the Exhibit is included.

Available from Thomas J. McLaughlin, Dir. and Ed., Combined Book Exhibit, 950 University Ave., New York 52, N. Y.

CHRONIC DISEASE

See 260.

CONGENITAL DEFECT

197. Mathieu, Betty J.

Congenital deficiency of the abdominal muscles (with associated multiple anomalies), by Betty J. Mathieu (and others). J. Pediatrics. Jan., 1953. 42:1:92-98.

Case reports of three children presenting congenital deficiency of the muscles of the abdominal wall. In addition to the known associated anomalies, the one female patient is the first reported case to have an associated anomaly of the genitourinary tract. No anomaly of the gastrointestinal tract was found in any of the three cases reported in this article, although other abnormalities in addition to those of the abdominal wall and genitourinary tract are prevalent in the series.

DEAF

198. Lesser, Arthur J.

Hearing impairments in childhood. Pediatrics. Dec., 1952. 10:6:724-729.

A series of articles, of which this is the first, has been prepared by physicians with experience in the clinical, public health and educational aspects of some of the newer programs for handicapped children. Articles on programs for children with epilepsy and cerebral palsy will appear in the future. "... The opportunities for helping children with impaired hearing which have been made possible by improvements in the vacuum tube, by specific therapy for middle ear infections, and by advances in speech training are among the most exciting in this decade...."

See also 191.

DEAF--LIPREADING

See 261.

DEAF--PROGRAMS

199. MacPherson, James Robert

The status of the deaf and/or hard of hearing mentally deficient in the United States. Am. Annals of the Deaf. Sept., Nov., 1952. 97:4 & 5. 2 pts.

Part I of this two-part article was annotated in the December, 1952 issue of Bulletin on Current Literature (#1003). Part II gives statistical tables on the number of deaf or hard of hearing who were of school age in institutions for the mentally deficient. Data covered both residential and day schools. Included are remarks concerning the education and training of the deaf or hard of hearing mentally deficient, as submitted by various schools caring for this group. Teachers in these institutions were surveyed for information on their training, their methods of teaching and what vocational activities they considered suitable for the mentally deficient with hearing loss. In conclusion, the writer states that much research is needed on the relationship between deafness and mental deficiency.

DEAF--SPECIAL EDUCATION

See 178.

DEAF--SPEECH CORRECTION

200. Speech and speech perception; a summer meeting panel discussion, June 18, 1952. Moderator: Clarence V. Hudgins. Volta Rev. Jan., 1953. 55:1:20-38.

Members of the panel and the subjects of their discussions were: Beginning speech for young deaf children, Marjorie E. Magner; Acoustical gestures in the speech of children, Dr. Gordon E. Peterson; A test for measuring achievement in speech perception among young deaf children, Marian Quick; The relation between degree of deafness and response to acoustic training, Louise Hopkins; and, Progress report on an acoustic training experiment, Dr. Clarence V. Hudgins.

DENTAL SERVICE

201. Album, Manuel M.

Dental procedures and general anesthesia in cerebral palsy. Dental Digest. July, 1952. 58:7:296-301, 309. Reprint.

"This article brings up to date the knowledge concerning the techniques employed in dental procedures and the administration of general anesthesia for cerebral palsied children, who must frequently be totally anesthetized in order to be treated.

"A step-by-step description of the technique to be used in administering the anesthetic and measures to be taken preoperatively and postoperatively are presented."--Digest. Pictures used to illustrate this article were taken at Children's Hospital, Philadelphia, and surgery performed under anesthetic procedures described was also done at this hospital.

EMPLOYMENT

202. U. S. Defense Transport Administration

Employment of the physically handicapped in the industries under DTA

EMPLOYMENT (continued)

jurisdiction. Washington, D. C., The Administration, 1952. 12 p.
(DTA, Manpower No. 6) Mimeo.

A memorandum from the Director of the Manpower Division addressed to "Industries, National and International Unions Interested in Domestic Transportation, Warehousing and Storage and Port Facilities," outlining and emphasizing reasons why employment of the physically handicapped is beneficial to industry. Instances of satisfactory placement and work performance are cited and suggestions are given on utilizing this additional source of manpower and ways of locating and hiring unemployed handicapped workers. Two further studies will cover employment of women and older workers

EMPLOYMENT (INDUSTRIAL)--PLACEMENT

203. U. S. Civil Service Commission

Guide for the placement of the physically handicapped. 5th ed.
Washington, D. C., The Commission, 1952-

Library has: Part I, Aircraft positions (Pamphlet 14-1, May, 1952).

Data based on current physical demands of civil-service positions and used in establishing minimal physical standards are presented in ready-reference form for Federal appointing officers and non-Federal groups interested in placement of the physically handicapped. The introduction defines types of handicaps as a guide in judging placement potentialities. Jobs are listed alphabetically with information given on physical activities of each and allowable handicaps. The latter half of the publication lists jobs suitable for those with orthopedic handicaps, defective vision and hearing, heart conditions, and arrested cases of tuberculosis.

Available from U. S. Superintendent of Documents, Washington 25, D. C., at 45¢ a copy.

EPILEPSY

204. Epilepsia. Nov., 1952. 3rd Series, vol. 1

Entire issue devoted to the subject.

Bibliography; the literature for 1951. pp. 158-177.

Contents: The classification of the epilepsies, Francis L. McNaughton. - Consciousness and cerebral localization, Stanley Cobb. - The role of alcohol in convulsive seizures, Richard G. Berry. -Mechanism of action and metabolism of anticonvulsants, J. E. P. Toman and J. D. Taylor. -Symposium on seizure mechanisms: Introductory remarks, A. Earl Walker. -Patterns of neuronal assemblies and the anatomical substratum of seizures, Paul I. Yakolev. -Recent contributions to seizure activation, H. W. Magoun. - General biochemical factors in neuronal discharge, Alfred Pope. -Mechanisms of seizures investigated by experimental production and control of biochemical lesion present in epileptogenic cortex, Donald B. Tower. --Electroencephalography, W. T. Liberson. -Experimental epilepsy, Arthur A. Ward, Jr. -- Anticonvulsant and convulsant agents, Harold E. Hinwich..

This annual issue is available from Dr. Jerome K. Merlis, Secretary-Treasurer, International League Against Epilepsy, 150 S. Huntington Ave., Boston 30, Mass., at \$2.00 a copy.

HANDICRAFTS

See 262.

HEMIPLEGIA--MEDICAL TREATMENT

205. Covalt, Donald A.

Rehabilitation of the patient with hemiplegia. Annals Internal Med.
Nov., 1952. 37:5:940-943. Reprint.

Pointing to results obtained with 200 cases of hemiplegia treated in the Department of Physical Medicine and Rehabilitation of the New York University-Bellevue Medical Center and followed up one year after discharge, Dr. Covalt states that 79.6 were capable of self-care and 20.4 were capable of some employment. He describes the rehabilitation program, as they have it set up--the selection of patients for an active rehabilitation program, the initial examination, procedures to prevent deformity while in bed, and the treatment program, including self-care. Such a program should be under the direction of the patient's physician.

HIP--DISLOCATION

206. Friedman, Barry

Congenital dislocation of the hip. Crippled Child. Feb., 1953.
30:5:5-7.

If congenital dislocation of the hip is recognized early and treatment instituted before the child begins to walk, results are excellent and the child has every chance of expecting a relatively normal hip joint. Months of hospitalization, surgery, and traction are the fate of the child whose treatment is neglected until after he starts to walk. The writer makes a plea for early recognition and early treatment if children with this condition are to be spared a permanent limp and possible arthritis of the involved hip at an early age.

207. Van Demark, Robert E

Subluxations and dislocations of the hip in cerebral palsy. S. Dakota J. Med. and Pharmacy. Dec., 1952. 5:12:329-330. Reprint.

In the cerebral palsied, secondary subluxations and dislocations develop after birth as a result of persistent adductor muscle action, the writer points out; few references are made to the condition, outside of orthopedic textbooks. He offers some suggestions on the medical care and, in some cases, surgical procedure for the condition.

HOMEBOUND--SPECIAL EDUCATION

208. Special Education Rev. Sept., 1952. 9:3.

Title of issue: Teaching the homebound child.

Contents: Enriching the curriculum for the physically handicapped home student, Gertrude Davis. -A student newspaper brings social experiences to the homebound child, Elizabeth Tepper. -What is a home teacher?, Florence Piaskowsky. -An approach to the education of homebound youth, Herbert Rusalem.

HOMEBOUND--SPECIAL EDUCATION (continued)

Gertrude Davis and Florence Piaskowsky are teachers on homebound service, Dept. of Special Education, Newark, N. J., public schools. Elizabeth Tepper, formerly a teacher of the homebound in Newark, is now teaching at Branch Brook School, Newark. Dr. Rusalem is Director of Services, Federation of the Handicapped, New York City.

This issue is available from Special Education Review, Department of Special Education, Board of Education, 31 Green St., Newark, N. J., at 50¢ a copy.

HOSPITALS--ADMINISTRATION

See 263.

HYDROTHERAPY

See 264.

LIBRARY SERVICE

209. Eaton, Elizabeth S.

Library program furthers the adjustment of blind patients. Hospitals. Jan., 1953. 27:1:65-66.

The writer, assistant chief librarian of the Veterans Administration Hospital, Hines, Ill., describes a library program for blind patients at that institution. Individual visits once a week and monthly meetings in the blind rehabilitation group for the promotion of the use of talking books have revealed interests and the type of books the patients would like to have in this form. Talking book machines and records are the chief reading material used. Patient reactions, total circulation, and requests are discussed. Miss Eaton recognizes that her group of patients is a non-representative group, limited to a particular age and sex group, and all blinded in adulthood, but she feels their reactions and requests mirror a need for more realistic pictures of their social surroundings to aid their return to family and independence.

MENTAL DEFECTIVES

210. Kirman, Brian H.

The backward child; Part I: pre-school age; Part II: school age and adolescence. Brit. Med. J. Dec. 13, Dec. 20, 1952. 4797 & 4798. 2 pts.

Another in the series of refresher courses for the general practitioner, this two-part article on the mentally retarded child discusses etiology, progress, maladjustment, special defects, diagnosis, certification, admission to an institution, educability. Problems arising with the school-age and adolescent mentally retarded are concerned with legal considerations, incidental illnesses, employment, delinquency, reproduction, and advice to parents considering further children.

See also 187.

MENTAL DEFECTIVES--EMPLOYMENT

211. Rockower, Leonard W.

A study of the use of sheltered workshops as an occupational training resource. Am. J. Mental Deficiency. Jan., 1953. 57:3:425-433.

A report of an experiment in New York City in which sheltered workshops and rehabilitation centers were utilized for the training of mental retardates. Results show the need for special services in conjunction with the availability of work activity, namely a social program to handle problems existing in the areas of personal habits, unrealistic aspirations, and thwarted inter-personal relationships. With such services, the sheltered workshop and rehabilitation center offer the most satisfactory training and work atmosphere for vocational rehabilitation of the mental retardate.

MENTAL DEFECTIVES--INSTITUTIONS

212. Walker, Gale H.

Standards for public training schools. Am. J. Mental Deficiency.
Jan., 1953. 57:3:361-372.

This statement of fundamental principles essential to proper institutional care of the mentally deficient is presented by the American Association on Mental Deficiency for use as a guide for administrators of schools for the mentally deficient, for legislators, and for parents of mentally deficient children. Functions of the school which institutions should provide are outlined.

Available in booklet form from Dr. Neil A. Dayton, Secretary, American Association on Mental Deficiency, P. O. Box 96, Willimantic, Conn., at \$1.00 a copy.

MENTAL DEFECTIVES--MENTAL HYGIENE

213. Fisher, Louise A.

Group therapy with mental defectives, by Louise A. Fisher and Isaac N. Wolfson. Am. J. Mental Deficiency. Jan., 1953. 57:3:463-476.

An experiment with group therapy techniques is reported, designed to follow as closely as possible Slavson's Activity-Interview Therapy and used with two groups of young female patients at Newark State School, Newark, N. Y. All these children presented emotional and behavioral abnormalities inexplicable on the basis of mental deficiency alone. Results demonstrated no significant psychometric rating increases, but a more alert attitude toward learning was developed. Eight of the twelve children showed improved behavior and attitudes, as well as more positive feelings, after the group experience.

MENTAL DEFECTIVES--PARENT EDUCATION

214. Kanner, Leo

Parents' feelings about retarded children. Am. J. Mental Deficiency.
Jan., 1953. 57:3:375-383.

The writer feels that more professional and humane attention must be paid to the attitudes and reactions of parents of mentally retarded children. He discusses, by means of a few definite instances, the implications of

MENTAL DEFECTIVES--PARENT EDUCATION (continued)

mental retardation in the life of the child and in the minds of parents and lists questions most frequently asked by parents. Emotional factors of family relationships cannot be left unconsidered in the study and treatment of the exceptional child.

215. Moss, Dorothy H.

Parents on the march. Public Welfare. Jan., 1953. 11:1:28-33.

This article by the Secretary of the National Association for Retarded Children traces the origin and growth of the parent group movement, what has been accomplished by such groups in legislative reforms, improved educational facilities, higher standards for institutions, schools and homes, and in the fields of research and education.

MENTAL DEFECTIVES--PERSONNEL

216. Whitney, E. Arthur

Some stalwarts of the past. Am. J. Mental Deficiency. Jan., 1953 57:3:345-359.

Sketched briefly in this paper presented at the 76th annual meeting of the American Association on Mental Deficiency are the lives of some of the individuals who have established work for the mentally retarded on a firm foundation. Included in the list are Samuel Gridley Howe, Dr. Edward O. Seguin, Dr. Henry Martin Knight, Dr. Isaac Newton Kerlin, Dr. Walter E. Fernald, Dr. Charles Sherman Little, Dr. Henry Herbert Goddard, Dr. Frederick Kuhlman, Dr. Mary M. Wolfe, Dr. Meta Anderson, Dr. Benjamin Baker, Edward R. Johnstone, and Dr. Frank V. Wilhite.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

217. Feldman, Irving S.

Psychological differences among moron and borderline mental defectives as a function of etiology. I. Visual-motor functioning. Am. J. Mental Deficiency. Jan., 1953. 57:3:484-494.

Report of a study of 108 subjects, chosen from the mentally defective population at Polk State School, Polk, Pennsylvania, to determine the differences in visual-motor functioning and response of two etiological types of higher grade defectives. These types are the exogenous (brain-injured, acquired type) and the endogenous (familial, inherited type). Method and procedure of the test are described and statistical data on results given. The general hypothesis investigated was to determine whether deficient visual-motor functioning is characteristic of exogenous types. Findings in this study may be said to have confirmed somewhat suggestions of previous studies.

Elaboration of the material in this article may be found in the author's dissertation, completed at the Graduate School of the University of Pittsburgh in 1951.

MENTAL DEFECTIVES--SPECIAL EDUCATION

218. Delp, Harold A.

Curriculum problems with the mentally retarded. Training School Bul. Dec., 1952. 49:8:187-203.

MENTAL DEFECTIVES--SPECIAL EDUCATION (continued)

Curriculum building for the mentally retarded requires adaptation for the particular children under consideration. The author does not attempt to give specific materials, plans, or course of study, but offers a few of the most critical ideas which might be used by a teacher or school attempting to develop its own curriculum. He suggests community surveys to demonstrate the general educational needs of children at various levels in the community, with emphasis on the retarded. Experience units, he feels, could be roughly outlined to show possible objectives for various situations, activities which could be used to develop the unit, and materials adaptable to the mentally retarded. From these, the special teacher could develop units adapted to the interests of actual classes.

219. Harris, Lucy M.

Reactions of adolescent, mentally deficient girls to a permissive atmosphere in an academic schoolroom. Am. J. Mental Deficiency. Jan., 1953. 57:3:434-446.

A study of the reactions of adolescent, borderline mentally deficient girls to a permissive program carried out at the Columbus State School, Columbus, Ohio, is described. The group was unselected and subjects taught were those of the regular classroom. Only the teacher's attitude toward the girls was planned. Behavior during the entire nine months of the experiment was recorded daily. From a study of the anecdotal records, it was determined that an atmosphere of permissiveness is practical in such a group.

220. Kirk, Samuel A.

What is special about special education? The child who is mentally handicapped. Exceptional Children. Jan., 1953. 19:4:138-142.

This article, the second of a series dealing with the special aspects of educating various types of exceptional children, points out that the curriculum for the mentally handicapped includes many of the regular aims and purposes of that for the normal child. However, material on special class organization, materials, special diagnosis, clinical teaching procedures, emphasis on learning disabilities and more individualization of teaching, parent education and more systematic instruction is included in the discussion.

221. Laing, J. K. Collier

The education and training of mental defectives at Darenth Park. Mental Health. Autumn, 1952. 12:1:3-10.

The writer, physician superintendent of Darenth Park, England, an institution for the training of mental defectives of both sexes, describes some of the techniques of training employed, the forms devised to stabilize and return patients to the community, to develop manual dexterity, and to afford occupational therapy. Special shops, set up in cooperation with industry, have provided useful work, the opportunity to earn, and the bridge between the institution and eventual release.

MENTAL DEFECTIVES--SPECIAL EDUCATION (continued)

See also 195; 199.

MENTAL DISEASE--MEDICAL TREATMENT

222. Reagan, Charles H.

Rehabilitation of 120 lobotomized patients in a VA hospital. Arch. Phys. Med. and Rehabilitation. Jan., 1953. 34:1:40-44.

A comprehensive evaluation of a therapeutic approach to the seriously ill psychiatric patient is presented here, with the part played by rehabilitation services after surgery. Patients in this series were hospitalized at the Veterans Hospital, Tuscaloosa, Alabama.

MENTAL HYGIENE

223. Stitt, Pauline G.

What's the score here? Crippled Child. Feb., 1953. 30:5:20-23.

In this adaptation of an address given at the annual convention of the National Society for Crippled Children and Adults in October, 1952, Dr. Stitt advocates making a score card of one's resources and liabilities, a perpetual inventory, to know what one can do. Not by refusing to face the facts of a handicap or refusing to admit one's potentials can a person work through to a realistic philosophy for making the most of life. Self-evaluation is reality-testing; it answers the question, "what is the true situation?"

MULTIPLE SCLEROSIS

224. Aird, Robert B.

Ultracentrifuge studies of lipoproteins in multiple sclerosis, by Robert B. Aird (and others). Neurology. Jan., 1953. 3:1:22-26.

"A preliminary report of ultracentrifuge studies concerned with the lipoproteins in the cerebrospinal fluid of 14 patients and in the serum of 27 patients with multiple sclerosis is presented.

"The concentration of the Sf (12-20) and Sf (20-100) lipoproteins in the cerebrospinal fluid were too low to be measured by means of the ultracentrifuge technique.

"There may be a slight correlation between the degree of activity of the disease process and the level of lipoproteins of the Sf (12-20) types in the serum of patients with multiple sclerosis. The available data, however, are not adequate to establish this relationship as statistically significant. Further studies, especially in patients with acutely progressing multiple sclerosis, are necessary."--Summary.

See also 233.

MUSCULAR DYSTROPHY

225. Arieff, Alex J.

Clinical histologic and electrical studies in muscular dystrophies, by Alex J. Arieff and Walter R. Kirschbaum. Neurology. Jan., 1953. 3:1:35-43.

MUSCULAR DYSTROPHY (continued)

Chronic progressive muscular dystrophies observed at Veterans Administration Hospital, Hines, Ill., and at Cook County and Michael Reese Hospitals, Chicago, were studied and some new viewpoints concerning histopathologic changes are given. Results of electro-diagnostic and electromyographic examinations are related to the clinical symptoms. Through the use of such techniques, it has been possible to differentiate better the various clinical groups. Tables present summary findings of clinical, histopathological, and electrical studies.

MUSIC THERAPY

226. Palmer, Martin F.

Musical stimuli in cerebral palsy, aphasia, and similar conditions.
Bul., Natl. Assn. for Music Therapy. Jan., 1953. 2:1:7-8.

The author, director of the Institute of Logopedics at Wichita, Kansas, discusses results of studies made at the Institute, using music therapy to produce relaxation and promote improved speech in the so-called congenital or developmental aphasics and certain types of adult aphasics. With cerebral palsied children, music sometimes relaxes, while in others, it produces more tenseness and discoordination. Good results have been produced temporarily in cases of severe athetosis and similar results noted in paralysis agitans.

This issue of the Bulletin, containing other brief articles, including "Music Therapy for Retarded and Autistic Children," by Louise E. Weir, is available from the Editor, Mrs. Esther Goetz Gilliland, Chicago Musical College, 64 E. Van Buren, Chicago 5, Ill., at 50¢ a copy.

OLD AGE--EMPLOYMENT

227. Klumpp, Theodore G.

Employment of the older worker. Public Health Reports. Jan., 1953. 68:1:20-22. Reprint.

The writer makes a plea for selective retirement of older workers, believing compulsory retirement to be unjust to those physically and mentally capable of continued work. Few industrial organizations have such a system of selective retirement, but public and private employers would profit equally if techniques were developed to relieve gradually the more taxing responsibilities as workers develop limitations of age. Through the method of keeping pay commensurate with productivity and the use of vocational retraining, retirement would be less of a problem.

228. U. S. Bureau of Employment Security

Workers are young longer; a report of the findings and implications of the Public Employment Service studies of older workers in five cities. Washington, D. C., The Bureau (1952). various paging. tables.

Directed to employers, personnel workers, union officials, and others interested in the problems of older people, this publication is a digest of the data contained in the original State reports made during a 1950 study of the employment problems of older workers in five localities. To this digest, other material summarizing data currently available has been added.

OLD AGE--EMPLOYMENT (continued)

Characteristics of older workers as compared with younger ones, facilities provided by local employment offices, types of counseling problems, techniques of counseling and placement, and programs for personnel counseling are discussed. Statistical data is included in the appendix.

Issued by the U. S. Bureau of Employment Security U. S. Department of Labor, Washington 25, D. C.

OLD AGE--MEDICAL TREATMENT

229. Morton, William

The elderly patient. Physiotherapy. Jan., 1953. 39:1:3-7.

Congress Lecture.

With the elderly patient physiotherapy is advocated to prevent worsening of the disability, to relieve pain, to restore function as far as possible, to encourage compensatory mechanism. Suggestions for making life more endurable and enjoyable are given. When physiotherapy has accomplished as much as is physically possible the use of mechanical aids, modification of environment, and encouragement of activity will speed adjustment to this period of life.

PARAPLEGIA--MEDICAL TREATMENT

230. Covalt, Donald A.

Early management of patients with spinal cord injury, by Donald A. Covalt (and others). J. Am. Med. Assn. Jan. 10, 1953. 151:2:89-94.

Drawing on experiences of the past four years in the paraplegic unit of the Institute of Physical Medicine and Rehabilitation at New York University-Bellevue Medical Center, the writers outline briefly what they consider to be the proper handling and treatment of the patient during the acute period following injury to the spinal cord, i. e., the first few weeks after injury. Described are: preoperative care (first aid at the scene of the accident), the advisability of laminectomy with several case histories, and postoperative care. The necessity for starting a rehabilitation program for these patients as soon as possible is stressed.

PARAPLEGIA--PSYCHOLOGICAL TESTS

231. Lindner, Harold

Perceptual sensitization to sexual phenomena in the chronic physically handicapped. J. Clinical Psych. Jan., 1953. 9:1:67-68. Reprint.

Report of a study to examine the validity of the hypothesis that the paraplegic patient's manifestations of psychological helplessness and expressions of the need for security might be applied, in terms of personality theory, to problems of sexual functioning. Results demonstrated that it is possible to differentiate two types of chronically disabled personality patterns, the differentiation lying within the state of sexual functioning. Although techniques of the test have not been fully standardized, they indicate that sexual functioning is a basic factor among the motivations and dynamics of such chronic disabilities as paraplegia.

PARENT EDUCATION

232. Ross, Helen

The handicapped child and his family. Crippled Child. Feb., 1953.
30:5:8-10.

Miss Ross, Administrative Director of the Institute for Psychoanalysis, Chicago, admits that raising a handicapped child involves many subtle adjustments, but believes there are not many which cannot be solved by parental care, aided by the family physician, the minister, and by various social and educational agencies of the community. Some of the problems of parents of handicapped children are explored.

PHYSICAL THERAPY--EQUIPMENT

233. Smith, Elizabeth A.

Home exercise devices. Phys. Therapy Rev. Jan., 1953. 33:1:21-24.

Exercise devices, constructed by a multiple sclerosis patient, are described in the hope they may serve as guides for other patients wishing to build their own home equipment. Included are arm pulleys, a stretching bar, hamstring pulleys, a bicycle adapted for resistance exercise, and an ankle exerciser. Illustrated.

POLIOMYELITIS

See 265; 266.

POLYNEURITIS

234. Di Fiore, John A.

The Guillain-Barre syndrome. J. Nervous and Mental Disease. Aug., 1952. 116:2:146-156. Reprint.

"... The purpose of this paper is to offer a brief review of this interesting neurologic disease and to present a group of cases demonstrating the variable clinical picture...." Cases presented are grouped under different clinical types observed in an attempt to demonstrate and emphasize the variability of the disease rather than to attempt a classification. A common feature noted in all cases was motor paralysis with a more or less rapid onset, frequently accompanied by sensory changes. The differential diagnosis between poliomyelitis, polyneuritis of specific types, muscular dystrophies, and spinal cord tumor is discussed briefly.

PSYCHOLOGICAL TESTS

235. Greenbaum, Marvin

Evaluation of a modification of the Thematic Apperception Test for use with physically handicapped children, by Marvin Greenbaum (and others). J. Clinical Psych. Jan., 1953. 9:1:40-44. Reprint.

"This study was designed to evaluate the Bachrach and Thompson modification of the Murray Thematic Apperception Test for use with physically handicapped children...." Two groups of 31 children each, obtained from a public school for exceptional children in Syracuse, New York, were the subjects used in this particular study. All children were classified as orthopedically handicapped. Procedure and results of the test are discussed; introducing a handicap into the TAT pictures did not seem to stimulate greater productivity on the part of the handicapped children. The present

PSYCHOLOGICAL TESTS (continued)

study lends support to the hypothesis that disability is denied by the handicapped individual. A further study, to compare responses of a control group of physically normal children to the Bachrach version with responses of the two original groups of handicapped children, is in progress and will be reported in the near future.

READING

236. Park, George E.

Mirror and reversed reading. J. Pediatrics. Jan., 1953. 42:1: 120-128.

A discussion of some of the phases involved in the evaluation of alleged mirror vision and kindred conditions, with the presentation of two case histories and the summary and recommendation following staff conference on both. The author states that mirror vision and reversals are often used by children to express emotional dissatisfaction, to gain attention, or as an escape from reality. It is not basic in causing dyslexia, the syndrome following disturbance of the emotional, physical and educational development and progress, but merely a symptom. Proper therapy calls for a complete examination of the child from every viewpoint.

REHABILITATION

237. Krusen, Frank H.

A new concept in physical medicine and rehabilitation: treating "the whole man." Hospitals. Jan., 1953. 27:1:59-60.

Administrative problems and responsibilities connected with the care and rehabilitation of those with chronic disabilities and illnesses now face the hospital administrator and physician. Dr. Krusen urges the development of hospital facilities and medical programs which will add life to years, as well as years to life. The answer to these problems lies, in his opinion, in the development of more institutes of physical medicine and rehabilitation affiliated with and attached to general hospitals for the acutely ill. Such a program calls for consideration of psychological and social aspects of rehabilitation, as well as the physical problems. Through a new kind of medical history, psychological and bio-social diagnosis of the individual could be combined with a physical diagnosis leading to more consistent treatment of the "whole man."

238. Rusk, Howard A.

Total rehabilitation. J. Natl. Med. Assn. Jan., 1953. 45:1:1-16.

Dr. Rusk outlines the requirements for a dynamic rehabilitation program, then discusses treatment procedures and methods of training in various disabilities--hemiplegia, paraplegia, quadriplegia, multiple sclerosis, aphasia, and amputation.

239. Whitehouse, Frederick A.

Teamwork: clinical practice in rehabilitation. Exceptional Children. Jan., 1953. 19:4:143-148, 150-153.

REHABILITATION (continued)

The author, director of vocational rehabilitation at the Institute for the Crippled and Disabled in New York City, defines the functions of the various members of a rehabilitation team and discusses client evaluation, the value of the "case meeting," how decisions are made on handling clients, the clients' counselor, and the reactions of clients to the teamwork approach. A sample program is suggested which includes all types of therapy.

REHABILITATION--INDIA

240. Sant, M. V.

Problem of handicapped children in India (except the blind, deaf, and mute). Indian J. Child Health. Nov., 1952. 1:11:597-607.

Although there is no reliable source of information on the number of the physically handicapped in India, the writer estimates there must be at least 7,000,000. He gives a frequency table of the various crippling conditions for which children were treated; this table indicates tuberculosis and malnutrition are the main problem today. The inability of parents to seek treatment for handicapped children springs from a number of causes. Institutions offering facilities for treatment in India are listed and described briefly. Manufacture and supply of prosthetic appliances have not made much progress here. The problem of bringing treatment to every handicapped child calls first for an enumeration of the handicapped children, then, the setting up of decentralized clinics which will reach more of the population.

Also included in this issue are the following articles: Orthopaedically handicapped children in Ceylon, G. M. Muller. - The rehabilitation of the physically handicapped child, P. Coleman Mehta. - The occupational therapist and the handicapped child, Kamala V. Nimbkar. - The education of the mentally handicapped child, Jai H. Vakeel. - The blind child in India, Nagendranath Sen Gupta. - The problem of the deaf in India, S. N. Banerji. - Social aspects of juvenile delinquency, T. L. Kochawara.

REHABILITATION--OHIO

241. Ohio's Health. Dec., 1952. 4:12

Entire issue devoted to articles on the subject.

Contents: Rehabilitation takes teamwork, Richard S. Bachman and Miss Mildred Rankin. - Ohio's new rehabilitation center, Ralph E. Worden. - Aspects of dental rehabilitation, Harvey C. Janke. - The public health nurse functions in a rehabilitation program. - Rehabilitating hard-of-hearing children, David L. Miller.

REHABILITATION--PROGRAMS

242. World Health Organization

Joint Expert Committee on the Physically Handicapped Child; first report. Geneva, WHO, 1952. 26 p. (WHO Technical report ser. no. 58)

Convened by WHO with the participation of United Nations, ILO, and UNESCO.

REHABILITATION--PROGRAMS (continued)

Containing the collective views of an international group of experts, this report outlines a comprehensive program for the care and education of physically handicapped children, calling for adequate services for health, education, social work, and vocational training.

See also 267.

REHABILITATION--SURVEYS--NEVADA

243. Nevada. Legislative Counsel Bureau

Survey of handicapped children in Nevada, by Dorothy DeWhitt. Carson City, Nev., The Bureau, 1952. 57 p. (Bul. no. 18) Planographed. The Nevada Legislative Counsel Bureau, a non-partisan and non-political fact-finding agency, authorized this study by Mrs. DeWhitt. In it she describes the various types of handicaps, the programs of various Western states, and discusses in detail what is being done in the state of Nevada. In conclusion, a chapter is devoted to recommendations to further the education and care of handicapped children in Nevada. Statistical data on state services already in existence are given. The study will serve as the thesis for a master's degree in education for Mrs. DeWhitt who is a speech therapist.

The report is distributed by the Nevada Legislative Counsel Bureau, Carson City, Nevada.

RHEUMATIC FEVER--MEDICAL TREATMENT

244. Walsh, Bernard J.

Management of rheumatic fever. GP, General Practitioner. Jan., 1953. 7:1:85-94. Reprint.

The writer discusses the clinical picture of this disease, laboratory findings of the electrocardiogram and sedimentation test, the reactions of the heart in rheumatic fever, and gives a plan of treatment, including the use of bed rest, the prevention of respiratory infection, the administration of aspirin, digitalis, and diuretics. Occupational therapy and schooling in the convalescent stages are desirable. Briefly explained are measures for the prevention of future trouble, the differential diagnosis, and prognosis in rheumatic fever.

RHEUMATIC FEVER--PREVENTION

245. Smith, Mary Alice

A community program for the prevention of rheumatic fever recurrence. Public Health Reports. Jan., 1953. 68:1:16-19.

An interim accounting of rheumatic fever activities, as a part of a public health program to demonstrate techniques of community action in heart disease control, is reported in this article. The program was initiated in Newton, Mass., in 1948. Data on the organization of controlling methods, on treatment schedules, and results of treatment are given. The author was formerly medical officer-in-charge-of the Newton Heart Demonstration Program.

RHEUMATIC FEVER--PREVENTION (continued)

On page 12 of this same issue appears an article titled "The Prevention of Rheumatic Fever," a statement of the Council on Rheumatic Fever and Congenital Heart Disease of the American Heart Association. It deals with the treatment of streptococcal infections, recommended schedules of treatment, and prophylactic methods of prevention of such infections.

SHELTERED WORKSHOPS

See 211.

SHELTERED WORKSHOPS--NEW YORK

246. Nachmani, Sylvia F.

Co-ordinating all services in workshops of the New York Guild for Jewish Blind. New Outlook for the Blind. Dec., 1952. 46:10:289-293.

The writer describes a method to better coordinate services to clients and workers in the sheltered workshops of the Guild, instituted within the past three years. The New York Guild for Jewish Blind is a multiple-function agency serving on a non-sectarian basis the blind and visually handicapped; it provides for the needs of the very young, the adolescent and adult groups, and the aged. A description of the sheltered workshops, their organization and administration, is given and the manner in which other departments of the agency provide social service casework for clients is explained.

SOCIAL WELFARE

See 268.

SOCIAL WELFARE--PLANNING

247. Community Chests and Councils of America

Framework for planning; a chart book. New York, The Councils, 1953. 20 p. charts.

"This booklet shows graphically some significant facts about community health and welfare planning--the size and nature of the program with which it deals, some important general factors which affect community planning, and some major program questions in each of the fields of service...."--Introduction. Material consists of charts with brief explanatory discussions. Major current issues which must be taken into account are dependency, maladjustment, health and recreation. Its use is suggested in group planning by board members, annual meetings, and those interested in health and welfare services.

Available from Community Chests and Councils of America, 155 East 44th St., New York 17, N. Y., at 75¢ a copy.

SOCIAL WELFARE--SURVEYS--OHIO

See 269.

SPECIAL EDUCATION

248. U. S. Office of Education

Some problems in the education of handicapped children, by Romaine P. Mackie. Washington, D. C., The Office, 1952. 12 p. (Pamphlet no 112)

SPECIAL EDUCATION (continued)

248. A brief pamphlet setting forth some of the major problems in the education of handicapped children--the orthopedically handicapped, those with partial sight and impaired hearing, those with cerebral palsy. Written "with an international audience in mind," it does, however, offer suggestions especially applicable to the American scheme of education.

Distributed by the U. S. Superintendent of Documents, Washington 25, D. C., at 15¢ a copy.

SPECIAL EDUCATION--KENTUCKY

249. Kentucky. Department of Education

Exceptional children; administration, supervision, examination, reporting, identification, housing, curriculum, aids to instruction, home instruction, consultation. Frankfort, Ky., The Dept., 1952. 19 p. (Educational Bul. Dec., 1952. 20:10:451-470)

Practical help for the administrator and supervisor appraising local needs in the development of improved instruction for exceptional children who are handicapped physically or mentally is given in this pamphlet. Although discussion of each phase of the problem of special education is brief, consideration is given to special schools and classes, regular classes with a "special" teacher assigned to supply training and techniques applicable to handicaps, and home teaching.

Issued by State Department of Education, Frankfort, Ky.

SPEECH CORRECTION

See 270.

SPEECH CORRECTION--EQUIPMENT

250. Bell, Dorothy

A "medicine bag" for the speech correctionist, by Dorothy Bell and E. L. Pross. J. Speech and Hearing Disorders. Dec., 1952. 17:4:397-400. Reprint.

Basic essentials for a kit of materials which the speech correctionist would need to supply all the "tools" for preliminary examination, minimum lesson material for children of all ages, and some supplies for work with adults are recommended. Twenty-two items are included in the suggested kit and it was recognized that the material would have to be supplemented in week-after-week meetings with any one child or adult.

STUTTERING

251. Washington. Seattle Public Schools.

Is your child beginning to stutter, by Elvena Miller. Seattle, Wash., The Schools, 1952. 23 p.

Helpful suggestions and answers for parents on the causes of stuttering in children, what they, as parents, can do to help the child who stutters, and how they may aid the child in learning to talk. Many misconceptions about stuttering are cleared up for the anxious parent and some helpful reading material given on stuttering.

Published by the Seattle Public Schools, Seattle, Washington.

VEINS

252. Krause, George Lynn

Varicose veins. 1. Diagnosis and treatment. 2. Nursing care, by Frances C. Vetter. Am. J. Nursing. Jan., 1953. 53:1:70-72.

Tests used in diagnosis of varicose veins are explained briefly and various aspects of treatment of the condition are given. Surgical treatment is recommended as being much more successful in offering permanent results than the injection of sclerosing solutions. Several surgical procedures are compared. In the second part of the article, a nurse outlines the care given patients after surgery for varicosities and the treatment of varicose ulcers. Education of the patient in prevention and control of edema, promotion of general health, and prevention of recurrences are the nurse's main duty.

VOCATIONAL REHABILITATION--BIBLIOGRAPHY

253. California. University. University Extension, Los Angeles

Selected sources of free and inexpensive information concerning vocational rehabilitation; a bibliography (suitable for use in educational institutions and by the lay public), by Lynn L. and Lillian L. Ralya. Santa Monica, Cal., The Compilers, c1953. 8 p.

A brief bibliography dealing with vocational rehabilitation in general and as it relates to specific disabilities. Material was chosen for inclusion on the basis of validity and recency, coverage of basic facts and principles, reader appeal, availability and cost, and suitableness for the use of beginning readers in the field. Pertinent bibliographic information, such as source, cost, etc., is given for each item listed.

Available from the compilers, Lynn L. and Lillian L. Ralya, 907 Fourteenth Street, Santa Monica, Calif., at 25¢ a copy.

VOLUNTEER WORKERS

254. Community Chests and Councils of America

A volunteer bureau handbook; purpose, organization, operation. New York, The Councils, 1952. 82 p. (Bul. no. 168. Sept., 1952)

Information gathered in a series of workshops, held in various parts of the United States in 1948-49, has been studied and developed through the efforts of volunteer bureau directors and special work groups who have had actual experience in setting up and organizing volunteer bureaus. A variety of services which volunteers can perform within the community are suggested. Administrative details on agency relations, recruiting, interviewing, referrals, job classifications, follow-up assignments, standards of service, and recognition of volunteers are explained clearly. The appendix contains a miscellany of information on report forms, suggested references for further reading.

Available from Community Chests and Councils of America, 155 E. 44th St., New York, N. Y., at \$3.50 a copy.

255. League of Red Cross Societies

Guide on Red Cross volunteer service. Geneva, Switzerland, The League, 1952. 31 p.

VOLUNTEER WORKERS (continued)

A publication written to aid National Red Cross Societies in developing and improving their volunteer programs. In it are suggested some aspects of the philosophy of volunteer service, possible fields of service, fundamentals to be considered in organizing a volunteer program, and the mutual responsibilities of the individual volunteer and the Red Cross Society. A bibliography of Red Cross training manuals in use in other countries is given.

See also 263.

WHITE HOUSE CONFERENCE ON CHILDREN AND YOUTH

256. National Midcentury Committee for Children and Youth

Report on children and youth, 1950-1952. Raleigh, N. C., Health Publications Institute, c1952. 46 p.

A progress report of the work of the Committee in the two years following the Midcentury White House Conference on Children and Youth, held in December, 1950. Information is based on reports from the states, from national organizations, from federal agencies, and other sources, and cites examples of ways in which some of the recommendations of the Conference have been acted upon. The organizational structure and program of the Committee are explained briefly. Bibliography.

Available from Health Publications Institute, Inc., 216 N. Dawson St., Raleigh, N. C., at \$1.00 a copy.

New Books Briefly Noted

BLIND--SPECIAL EDUCATION

257. Loomis, Madeleine Seymour

Which grade of Braille should be taught first? New York, Columbia Univ. Teachers Coll., c1948. 102 p. Mimeo. Paperbond.

The structure of the Braille system, mental process of learning symbols and learning to read, present methods of teaching Braille to children, and the advantages of teaching Grade Two Braille to beginners are discussed in this book for the teacher of the blind. The emphasis is on teaching children rather than adults. An evaluated list of books for children is supplied by Marjorie E. Garnett; the evaluation is on desirability from a Braille point of view. In conclusion a list of words unchanged by contractions is given.

Available from Bureau of Publications, Teachers College, Columbia University, 525 W. 120th St., New York 27, N. Y., at \$1.25 a copy.

CEREBRAL PALSY--SPEECH CORRECTION

258. Froeschels, Emil

Dysarthric speech (speech in cerebral-palsy). Magnolia, Mass., Expression Co., c1952. 172 p. illus. \$3.75.

CEREBRAL PALSY--SPEECH CORRECTION (continued)

Written on the subject of speech improvement for cerebral palsied children and those handicapped by infantile paralysis, material in this book has been simplified for the use of the layman and scientist interested in speech correction. Devoted chiefly to the symptomatology and therapy of congenital dysarthrias and those acquired in early childhood, information is equally applicable to dysarthrias resulting from injuries, strokes, and inflammations of adulthood. The author gives a clinical description of the cerebral palsied child with regard to speech impediments and outlines an experimental phonetic method of procedure for the correct production of sound-units. A survey and analysis, with methods of therapeutic treatment, of aphasic dysarthria, often found in the cerebral palsied, is given. Special methods of treatment for lisping, rhinolalia, accompanying movements (spasmodic), vocal disorders, articulation, enunciation, intonation patterns, resonance, volume and other defects which mark disarthric speech are described.

CHILD BEHAVIOR--INSTITUTIONS

259. Reid, Joseph H.

Residential treatment of emotionally disturbed children; a descriptive study, by Joseph H. Reid and Helen R. Hagan. New York, Child Welfare League of America, 1952. 313 p. tables. \$3.50. Paperbound.

This study, published with the aid of a grant from the Field Foundation, gives detailed descriptions of 12 residential institutions offering treatment for the child with serious personality disorders. Daily routine, methods of control employed, education and recreation programs, and coordination of the child's treatment with his parents' are described as carried out in each institution. The only evaluative material presented in the book is a critique of each center studied, written by their respective directors. For all those who work with seriously disturbed children, this book offers a variety of methods of approaching a common problem. The purpose of this project was twofold: 1) to provide an accurate picture of residential treatment in the United States, and 2) to provide sustained consultation service to communities and agencies interested in developing such a program. Programs are varied, from those considered medical and administered by physicians, to social agency programs, administered by social workers. Some are supported by public, others by private, funds.

CHRONIC DISEASE

260. Commission on Chronic Illness

Preventive aspects of chronic disease; conference proceedings, March 12-14, 1951. Baltimore, The Commission, c1952. 311 p.

A complete record of the Conference is presented in the proceedings --reports of the working committees, addresses, and summary statements on what is now known about prevention of the various types of chronic disease. Five sections covered the evaluation of scientific data, prevention in medical practice, professional information and training, community organization and services, and public education.

Available from Health Publications Institute, 216 N. Dawson St., Raleigh, N. C., \$2.50, paperbound; \$3.50, cloth.

DEAF--LIPREADING

261. Macnutt, Ena G.

Hearing with our eyes; a lipreading textbook for teachers of the deaf and hard of hearing child, with manual for accompanying workbooks.

Boston, The Author, c1952. 147 p. Mimeo. Spiral binding.

Together with: Lipreading workbook to accompany

A series of lessons helpful to teachers who have had training in the theory and practice of teaching lipreading are presented in this manual. They have been used successfully over a period of years in the schools of Newton, Mass., and are planned for elementary grades, beginning with the second and third and continuing through the fifth and sixth. With the workbook which accompanies the manual, and periodic reviews, there is sufficient material for two years of lipreading instruction. Each lesson consists of 24 sentences, a story, and two games or devices.

The workbook is the first of its kind for use with lipreading instruction, the author believes. It is valuable in checking the pupil's progress and adding incentive to learning.

Available from the Volta Bureau, 1537 35th St., N. W., Washington 7, D. C., at \$4.50 a copy; accompanying workbook, 35¢.

HANDICRAFTS

262. Dryad Handicrafts

Occupational handicrafts. Peoria, Ill., Chas. A. Bennett Co. (1952). various paging. illus.

A selection of leaflets (25), originally published by Dryad Handicrafts, Leicester, England.

Chosen for their usefulness to occupational therapy departments, training schools, and wherever craftwork is undertaken, the leaflets collected in this book cover a variety of handicrafts--caning chairs, stencilling, glove making, needle weaving, rug weaving, netting, papier mache, linoleum block printing, work with plastics, felt, wooden ware, and raffia, and the making of dolls, lampshades, animals, slippers, baskets, and mats. Illustrated, detailed instructions are given.

HOSPITALS--ADMINISTRATION

263. Sloan, Raymond P.

This hospital business of ours. New York, G. P. Putnam's Sons, c1952. 331 p. \$4.50.

Written primarily for the trustee and other hospital workers this guide to the functioning of the modern hospital, its complexities and problems, is also for the layman. Divided into two sections, "Some Facts and Figures" and "Ready for Trustee Action," it offers background material on hospitals, the sums involved in their operation, their place in research and education, and their connection with other public health activities. Section II considers finances, problems of medical concern, personnel relationships, and community public relations. A bibliography of material for further study is included. The author, editor and editorial director of The Modern Hospital magazine for the past 18 years, has directed much of his attention to the development of better trustee understanding of hospital organization and operation.

HYDROTHERAPY

264. Lowman, Charles L.

Therapeutic use of pools and tanks, by Charles L. Lowman and Susan G. Roen. Philadelphia, W. B. Saunders Co., 1952. xiii, 90 p. illus. \$3.00. Spiral binding.

This manual, presenting the theory and practice of therapeutic exercise in the treatment pool, gives a brief history of the therapeutic use of water, discusses construction and maintenance of pools and tanks, qualifications and duties of the pool director, describes and illustrates equipment and types of cases treated. The remainder of the manual is devoted to techniques of exercises, including gait training in pools and exercises under water for various orthopedic conditions. The appendix contains a reproduction of the plan for a minimum pool, developed by the American Physical Therapy Association in cooperation with the National Foundation for Infantile Paralysis.

POLIOMYELITIS

265. International Poliomyelitis Congress.

Poliomyelitis; papers and discussions presented at the Second International Poliomyelitis Conference. Philadelphia, J. B. Lippincott Co., c1952. 555 p. illus., charts, tabs.

"This publication makes available a complete review of the tremendous progress made in acquiring knowledge of poliomyelitis since the First International Poliomyelitis Conference was held in 1948. The Conference has had the co-operation of the leading medical organizations, research institutes and universities throughout the world" The book covers a wide range of subjects: the virus, pathology of poliomyelitis, diagnosis, treatment, both physical and surgical, the social and psychological aspects of the disease, immunity and resistance, ecology. The last section is devoted to scientific exhibits presented at the Conference.

POLIOMYELITIS--BIOGRAPHY

266. Walker, Turnley

Roosevelt and the Warm Springs story. New York, A. A. Wyn, c1953. 311 p. \$3.50.

This intimate story of Franklin D. Roosevelt and his friends at Warm Springs Foundation, his part in its development from a shabby little mountain resort to an internationally famous center for research and rehabilitation, is written with warmth and simplicity by a man who was once a patient at Warm Springs. The many people who shared the dream with Roosevelt--personnel and patients at Warm Springs, the townspeople, Basil O'Connor, now President of the National Foundation for Infantile Paralysis--were a source of information and personal anecdotes that give us a picture of Roosevelt, the man, rather than the politician. Mrs. Roosevelt, in a short foreword, has labeled the book "delightful" and feels many people will gain help from it and a better understanding of how the handicapped can live full lives. with courage and satisfaction.

REHABILITATION--PROGRAMS

267. United Nations

Modern methods of rehabilitation of the adult disabled; report of a group-training course organized by the, with the cooperation of The World Health Organization and The International Labor Organization, held in Sweden, Finland, and Denmark, Sept. 8-Nov. 7, 1952. Geneva, Switzerland, U. N., 1952. 108 p.

The primary purpose of the group-training course was to study each aspect of rehabilitation service--the medical, educational, social and vocational--with emphasis on the coordination and integration of all services into an effective, comprehensive rehabilitation program. The Proceedings contained in this report give extensive summaries of the technical lectures, demonstrations, and discussions occurring during the course. Physical disability, its prevention and limitation, and the rehabilitation of those permanently disabled were studied by teams from eight countries, made up of specialists in public health administration, labor administrators, orthopedic surgeons, physicians specializing in physical medicine and in vocational assessment of the handicapped, physiotherapists, social workers, after-care nurses, and vocational counselors.

Available from International Documents Service, Columbia University Press, 2960 Broadway, New York 27, N. Y., at \$1.25 a copy.

SOCIAL WELFARE

268. United Nations. Department of Social Affairs

Preliminary report on the world social situation, with special reference to standards of living. New York, The Dept., 1952. 180 p.

In this most important document the economically less-developed areas of the world have been considered in greater detail since it is in these areas that the need is greatest. "... After an introductory chapter and a background chapter on population, the report deals with these factors on a subject-matter basis--health, food and nutrition, housing, education and communication, conditions of work and employment, special problems affecting living standards, and general levels of income and welfare. The concluding three chapters, however, attempt a regional approach in order to gain a general picture of living conditions in particular areas (Latin America, the Middle East, South and Southeast Asia)" The material is not based on new or original research data and does not attempt to report on government programs to improve conditions or to analyze systematically social legislation or social security systems, welfare and health programs, community development projects, and like projects. Discussion of the handicapped in the world situation is brief.

Available from International Documents Service, Columbia University Press, 2960 Broadway, New York 27, N. Y., at \$1.75 a copy.

SOCIAL WELFARE--SURVEYS--OHIO

269. Ohio. Council of Social Agencies, Cincinnati

The Cincinnati report; an appraisal by 600 citizens of governmental and voluntary social services in Cincinnati and Hamilton County, Ohio,

SOCIAL WELFARE--SURVEYS--OHIO (continued)

1950-1952. Cincinnati, The Council, c1952. 275 p. Charts. Spiral binding.
Planographed.

This Agency Appraisal Project was made to provide a guide for the continuing development of social services and the strengthening of existing services. Divided into five parts, it describes the Project, gives an inventory and appraisal of the social services with recommendations for improvement, the general findings, a report of each participating agency, and last, suggests recommendations demanding first priority. Chapter VIII briefly considers rehabilitation services. Self-appraisal reports prepared by the individual agencies include information on purpose, types of service persons eligible for service, personnel, research records and statistics, financing and budgeting.

Available from the Council of Social Agencies, 312 West 9th St., Cincinnati 2, Ohio at \$2.00 a copy.

SPEECH CORRECTION

270. Arnold, Genevieve

Speech is fun; speech correction in the primary grades. Houston, Texas, The Author, c1953. 124 p. illus. Spiral binding. Planographed.

In this book Bobo, The Good Speech Clown, introduces each speech sound as a familiar sound in the child's experience; games and activities are built entirely around familiar objects and activities. Designed to cover the most difficult consonant sounds, the book gives teaching instructions and testing materials. The game-like approach motivates the child; he considers speech learning as fun.

Available from Miss Genevieve Arnold, Speech Clinic, University of Houston, Houston 4, Texas, at \$2.50 a copy.

THE NATIONAL SOCIETY FOR CRIPPLED CHILDREN AND ADULTS

11 South LaSalle Street, Chicago 3, Ill.

Founded in 1921, the National Society for Crippled Children and Adults and its 2,000 affiliates have a 30-year record of service. In the past year, 1,900 professional workers employed by the Easter Seal societies gave direct service to 125,000 crippled children and adults.

The three-point program of the National Society includes the following:

- (a) Research into causes, treatment and prevention of crippling conditions.
- (b) Education of the public, professional workers and families of the crippled.
- (c) Direct services, which include program consultation, organizational and legislative services to affiliated societies and to hospitals, schools and others working directly with the crippled.

Services of the National Society and its affiliates are financed by funds received during the Easter Seal appeal, augmented by other specific gifts and bequests.

To assure the highest level medical and professional advice and guidance in all fields, the National Society maintains liaison relationships with the American Medical Association, American Academy for Cerebral Palsy, American Academy of Pediatrics, American Academy of Orthopaedic Surgeons, American Academy of General Practice, American Congress of Physical Medicine, American Academy of Ophthalmology and Otolaryngology, American Psychological Association and American Speech and Hearing Association. It is a member of the National Health Council.

Fifty thousand volunteers comprise boards and committees of the Easter Seal societies.

Forty-five professional and technical members of the

National Society headquarters staff devote their time to professional consultation, professional education, public education, research and nationwide personnel service. Professional staff members made 400 field trips to all parts of the United States in the past year.

More than 700 professional persons have been trained for specialized work with the crippled under scholarships, fellowships, grants and workshops of the Easter Seal societies.

Two hundred parents' groups have been organized and are now functioning in behalf of crippled children, under the sponsorship of Easter Seal societies.

More than 500 services and facilities for the crippled are provided by the Easter Seal societies. They are made available in all 48 states, the District of Columbia, Alaska, Hawaii and Puerto Rico.

Direct services, provided by state and local societies, are helping thousands of children walk, talk and live as participating members of their families, communities and nation. These services and facilities include the following:

- Diagnostic clinics and medical consultation
- Hospitalization, surgical and convalescent care
- Mobile clinics and itinerant therapy
- Physical, occupational and speech therapy
- Medical and psychiatric social services
- Special teaching in the home, hospitals, convalescent homes, schools and classes
- Camping and recreation
- Sheltered workshops and home employment
- Employment and placement services
- Cerebral palsy treatment centers
- Rehabilitation centers

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